

Application Data Sheet**Application Information**

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Title:: HYPODERMIC SYRINGE
Attorney Docket Number:: P0003/7003
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 5
Small Entity:: Yes
Petition Included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Australia
Status:: Full Capacity
Given Name:: Robert
Middle Name:: Baird
Family Name:: Watson
City of Residence:: Upper Beaconsfield, Victoria
Country of Residence:: Australia
Street of Mailing Address:: 11 St. Georges Road
City of Mailing Address:: Upper Beaconsfield, Victoria
Country of Mailing Address:: Australia
Postal or Zip Code of Mailing Address:: 3808

Correspondence Information

Correspondence Customer Number:: 21127
Phone Number:: (617) 367-4600
Fax Number:: (617) 367-4656
E-Mail Address:: thendricks@kjpat.com

Representative Information

Representative Customer Number::	21127
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of		
	Continuation of		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
PCT	PCT/AU2004/00364	March 24, 2004	Yes
Australia	2003901382	March 25, 2003	Yes

Assignee Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::